PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attorney Docket Number PR60418USw **DECLARATION FOR UTILITY OR** First Named Inventor **David Harold DREWRY DESIGN** COMPLETE IF KNOWN PATENT APPLICATION Application Number (37 CFR 1.63) Declaration Declaration Filing Date Submitted OR Submitted after Initial Art Unit with Initial Filing (surcharge) Filing (37 CFR 1.16 (e)) **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: CHEMICAL COMPOUNDS (Title of the Invention) the specification of which is attached hereto was filed on (07/23/2004) as United States Application Number or PCT International Application Number PCT/US2004/023680 and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-Inpart applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Country Foreign Filing Date **Priority Not** Certified Copy Attached? Number(s) (MM/DD/YYYY) Claimed YES NO

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARAT	ION – l	Jtility or D	esig	n Patent Ap	plication	
rect all correspondence to: Customer Number 23347			OR 🗌 C			
Name						
Address						
City			State)	ZIP	
Country	Telephone				Fax	
I hereby declare that all statements made belief are believed to be true; and further the like so made are punishable by fine or imp jeopardize the validity of the application or	hat these si risonment, any patent	tatements were or both, under 1	made v 8 U.S.0	vith the knowledge	that willful false statements and the	
NAME OF SOLE OR FIRST INVENT	OR:	A petition has	s been	filed for this unsigne	ed inventor	
Given Name				nily Name		
(first and middle [if any])			Ors	Surname		
David Harold			DRI	DREWRY		
Inventor's Signature				Date (1/11/56		
Residence: City	<u></u>	Sale		Country	Citizenship	
Durham		NC		us	us	
Mailing Address c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398						
City		State		ZIP	Country	
Research Triangle Park		NC		27709	us	
NAME OF SECOND INVENTOR:		A petition ha	s been	filed for this unsign	ed inventor	
Given Name (first and middle [if any]) A petition has been filed for this unsigned inventor Family Name Or Surname						
James, Andrew						
Inventor's Signature Andrew Lenin				Date /1/11/06		
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c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398						
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Additional inventors are being named on the	ne su	pplemental Addition	nal Inve	entor(s) sheet(s) PTO/s	SB/02S or 02LR attached hereto	

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DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3			
Name of Additional Joint Inventor, if any:		Apet	tition has been filed for this	unsigned inventor		
Given Name (first and middle [if any])		Family Name o	or Surname		
James, Marvin		VEA	<u> </u>			
Inventor's Signature x				Date x		
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Mailing Address clo GlaxoSmithKline, Fiv	ve Moore D	rive, P	O Box 13398			
City Research Triangle Park	State NC		ZIP 27709	Country US		
Name of Additional Joint Inventor, if any:] A peti	unsigned inventor			
Given Name (first and middle [if any]))		Family Name or Surname			
Inventor's Signature						
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		ZIP	Country		
Name of Additional Joint Inventor, if any:		A petition has been filed for		unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature Date						
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		Zip	Country		

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		Attorney Docket Number	USw					
DECLARATION FOR		First Named Inventor	David Hare	rold DREWRY				
DESIGN PATENT APPLI	•	COMPLETE IF KNOWN						
(37 CFR 1.		Application Number						
	Declaration Submitted after Initial Filing (surcharge)	Filing Date						
with Initial Filing		Art Unit						
	(37 CFR 1.16 (e)) required)	Examiner Name						
I hereby declare that:								
Each inventor's residence, mailing	g address, and citizenship	p are as stated below next to	their name.					
I believe the inventor(s) named be which a patent is sought on the in		d first inventor(s) of the subje	ct matter which i	s claimed and for				
CHEMICAL COMPOUNDS								
(Title of the Invention)								
the specification of which								
is attached hereto								
OR $igotimes$ was filed on ($07/23/2004$) as United States Application Number or PCT International								
Application Number PCT/US2004/023680 and was amended on (MM/DD/YYYY) (if applicable).								
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on which priority is claimed. Prior Foreign Application	Country	Foreign Filing Date	Priority Not	Certified Copy Attached?				
Number(s)		(MM/DD/YYYY)	Claimed	YES NO				
	 -							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:								

[Page 1 of 2]

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, in the second						
City			State			ZIP
Country	Telej	phone	L			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR:						
Given Name		A petition has		filed for this unsigr nily Name	ned invent	or
(first and middle [if any])		ļ	Or Surname			
David Harold	-,-		DREWRY			
Inventor's			Date			Date
Signature						
Residence: City		State		Country		Citizenship
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Mailing Address						
c/o GlaxoSmithKline, F	ive Moore	Drive, PO	Box	13398		
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Research Triangle Park		NC		27709		US
NAME OF SECOND INVENTO	R:	A petition has	been	filed for this unsign	ned invent	or
Given Name				nily Name		
(first and middle [if any])		!	Or Surname			
LINN						
James, Andrew	·					
Inventor's Signature						Date
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c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398						
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DECLARATION			ADDITIONAL IN Supplement Page <u>3</u>	tal Sheet		
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Given Name (first and middle [if any])			Family Name or Surname			
James, Marvin		VEAL				
Inventor's Signature x				1/24/200 C Date x		
Residence: City Apex	State NC		Country US	Citizenship US		
Mailing Address c/o GlaxoSmithKline, Fiv	<u>re Moore D</u>	rive, P	O Box 13398			
City Research Triangle Park	State NC		ZIP 27709	Country US		
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Given Name (first and middle [if any])			Family Name or Surname			
Inventor's Signature Date						
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		Zip	Country		